

## General Assembly

## **Amendment**

February Session, 2008

LCO No. 5213

\*HB0553605213SR0\*

Offered by:

SEN. DEBICELLA, 21st Dist.

To: Subst. House Bill No. **5536** 

File No. 731

Cal. No. 480

## "AN ACT ESTABLISHING THE CONNECTICUT HEALTHCARE PARTNERSHIP."

- 1 Strike everything after the enacting clause and substitute the
- 2 following in lieu thereof:
- 3 "Section 1. (NEW) (Effective from passage) (a) As used in sections 1 to
- 4 7, inclusive, of this act:
- 5 (1) "Labor organization" means any organization that exists and is
- 6 constituted for the purpose, in whole or in part, of collective
- 7 bargaining or of dealing with employers concerning grievances, terms
- 8 or conditions of employment, or other mutual aid or protection.
- 9 (2) "Nonstate public employer" means a municipality or other
- 10 political subdivision of the state, including a board of education, quasi-
- 11 public agency or public library.
- 12 (3) "Nonstate public employee" means any employee or elected
- 13 officer of a nonstate public employer.

(4) "Nonstate public collective bargaining agreement" means the collective bargaining agreement in effect between any collective bargaining agent of any nonstate public employees and their employer.

- 18 (5) "State employee plan" or "state plan" means the group 19 hospitalization, medical, pharmacy and surgical insurance plan offered 20 to state employees and retirees pursuant to section 5-259 of the general 21 statutes.
- 22 (6) "Health Care Costs Containment Committee" means the 23 committee established pursuant to the ratified agreement between the 24 state and state employees' Bargaining Agent Coalition pursuant to 25 subsection (f) of section 5-278 of the general statutes.
  - (b) No employee shall be enrolled in the state plan if such employee is covered through such employee's employer by health insurance plans or insurance arrangements issued to or in accordance with a trust established pursuant to collective bargaining subject to the federal Labor Management Relations Act.
- 31 Sec. 2. (NEW) (Effective September 1, 2008) (a) Notwithstanding any 32 provision of title 38a of the general statutes, the Comptroller shall offer 33 coverage under the state employee plan to nonstate public employees 34 and shall pool such employees with the state employee plan, provided 35 the Comptroller receives an application from an employer of any such 36 employees and the application is approved in accordance with sections 37 1 to 7, inclusive, of this act. Premium payments for such coverage shall 38 be remitted by the employer to the Comptroller and shall be the same 39 as those paid by the state inclusive of any premiums paid by state 40 employees, except as otherwise provided in this section or section 4 of 41 this act. The Comptroller may charge each employer participating in 42 the plan pursuant to sections 1 to 7, inclusive, of this act an 43 administrative fee calculated on a per member per month basis. The 44 Comptroller shall offer participation in such plan for no shorter than 45 three-year intervals and, at the end of any interval, an employer may

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46 apply for coverage for an additional interval. The Comptroller shall 47 develop procedures by which employers receiving coverage for their 48 employees pursuant to the plan may withdraw from such coverage. 49 Any such procedures shall provide that nonstate public employees 50 covered by collective bargaining shall withdraw from such coverage in 51 accordance with chapters 68, 113 and 166 of the general statutes. 52 Nothing in sections 1 to 7, inclusive, of this act shall (1) require the 53 Comptroller to offer coverage to every employer seeking coverage 54 under sections 1 to 7, inclusive, of this act from every vendor 55 providing coverage under the state employee plan, or (2) prevent the 56 Comptroller from procuring coverage for nonstate employees from 57 vendors other than those providing coverage to state employees. The 58 Comptroller shall create applications for the purposes of this act. Such 59 applications shall require an employer to disclose whether the 60 employer will offer any other health plan to the employees who are 61 offered the state plan.

- (b) Nonstate public employees may receive coverage under the stateplan in accordance with this subsection.
  - (1) A nonstate public employer may submit an application to the Comptroller for coverage under the state plan of such employer's employees.
- (2) If a nonstate public employer submits an application for coverage of all of its employees, the Comptroller shall provide such coverage no later than the first day of the third calendar month following such application. A board of education and a municipality shall be considered separate employers for purposes of this act.
  - (3) If a nonstate public employer submits an application for less than all of its employees, or indicates in the application the employer will offer other health plans to employees who are offered the state health plan, the Comptroller shall forward such application to the Health Care Cost Containment Committee not later than five business days after receiving such application. Said committee may, not later

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than thirty days after receiving such application, certify to the application will shift a Comptroller that the significantly disproportional part of a nonstate public employer's medical risks to the state employee plan. If the Comptroller receives such certification, the Comptroller shall not provide coverage to such employer. If the Comptroller does not receive such certification, the Comptroller shall provide coverage no later than the first day of the third calendar month following the deadline for receiving the certification.

- (4) Any other provisions of the general statutes notwithstanding, initial participation in the state employee plan shall be a permissive subject of collective bargaining and shall be subject to binding interest arbitration only if the collective bargaining agent and the employer mutually agree to bargain over such initial participation. Such mutual agreement shall be in writing and signed by authorized representatives of the collective bargaining agent and the employer. Continuation in the state employee plan, after initial participation, shall be a mandatory subject of bargaining, and shall be subject to binding interest arbitration in accordance with the same procedures and standards that apply to any other mandatory subject of bargaining pursuant to chapters 68, 113 and 166 of the general statutes.
- (c) The Comptroller shall not forward an employer's application for coverage for review by the Health Care Cost Containment Committee, pursuant to this section, due to (1) the decision by individual employees to decline coverage from their employer for themselves or their dependents; or (2) the employer's decision to not offer coverage to temporary, part-time or durational employees.
- (d) Notwithstanding any provision of the general statutes, the state employee plan shall not be deemed (1) an unauthorized insurer, or (2) a multiple employer welfare arrangement. Any licensed insurer in this state may conduct business with the state employee plan.
- Sec. 3. (NEW) (*Effective September 1, 2008*) (a) Nonstate public employers eligible, pursuant to sections 1 to 7, inclusive, of this act, to

seek coverage for their employees under the state employee plan may seek such coverage for their retirees in accordance with sections 1 to 7, inclusive, of this act. Premium payments for such coverage shall be remitted by the employer to the Comptroller and shall be the same as those paid by the state, inclusive of any premiums paid by retired state employees.

- (b) If an employer seeks coverage for all of such employer's retirees in accordance with this section and all of such employer's employees in accordance with section 2 of this act, the Comptroller shall provide coverage no later than the first day of the third calendar month following such application. If an employer seeks coverage for less than all of such employer's retirees, regardless of whether the employer is seeking coverage for all of such employer's active employees, the Comptroller shall forward such application to the Health Care Cost Containment Committee not later than five business days after receiving such application. Said committee may, not later than thirty days after receiving such application, certify to the Comptroller that, with respect to such retirees, the application will shift a significantly disproportional part of an employer's medical risks to the state employee plan. If the Comptroller receives such certification, the Comptroller shall not provide coverage to such employer's retirees. If the Comptroller does not receive such certification, the Comptroller shall provide coverage no later than the first day of the third calendar month following the deadline for receiving the certification.
- (c) Nothing in sections 1 to 8, inclusive, of this act shall diminish any right to retiree health insurance pursuant to a collective bargaining agreement or to any other provision of the general statutes.
- Sec. 4. (NEW) (Effective September 1, 2008) (a) Each nonstate public employer shall pay monthly the amount determined by the Comptroller, pursuant to sections 1 to 7, inclusive, of this act, for coverage of its employees or its employees and retirees, as appropriate under the state employee plan. Such employer may require each covered employee to contribute a portion of the cost of such

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143 employee's coverage under the plan, subject to any collective 144 bargaining obligation applicable to such employer. If any payment due 145 by an employer under this subsection is not paid after the date due, 146 interest shall be added to such payment at the prevailing rate of

- 147 interest, as determined by the Comptroller. Such interest shall be paid
- 148 by the employer.

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- 149 (b) There is established, within the General Fund, a separate, 150 nonlapsing account to be known as the state plan premium account. 151 All premiums paid by employers and employees pursuant to sections 152 1 to 7, inclusive, of this act shall be deposited into said account. The 153 account shall be administered by the Comptroller, with the advice of 154 the Health Care Costs Containment Committee, for payment of 155 insurance premiums.
  - (c) In the event a nonstate public employer fails to make premium payments, the Comptroller may direct the State Treasurer, or any other officer of the state that is the custodian of any moneys made available by reason of any grant, allocation or appropriation by the state or agencies thereof payable to a nonstate public employer at any time subsequent to the failure of such nonstate public employer, to pay such premiums and interest to withhold the payment of such moneys in accordance with this subsection. Such moneys shall be withheld until the amount of the premium or interest then due and unpaid has been paid to the state, or until the Treasurer or such officers determine that arrangements, satisfactory to the Treasurer, have been made for the payment of such premium and interest, except that such moneys shall not be withheld if such withholding will adversely affect the receipt of any federal grant or aid in connection with such moneys.
  - Sec. 5. (NEW) (*Effective from passage*) The Comptroller shall not offer coverage under the state employee plan pursuant to sections 1 to 7, inclusive, of this act until the State Employees' Bargaining Agent Coalition has provided its consent to the clerks of both houses of the General Assembly to incorporate the terms of sections 1 to 7, inclusive,
- 175 of this act into its collective bargaining agreement.

176 Sec. 6. (NEW) (Effective January 1, 2009) No later than January 1, 177 2010, the Comptroller, shall report to the General Assembly, in 178 accordance with section 11-4a of the general statutes, 179 recommendations for the terms and conditions under which access to 180 the state employee plan may be provided to those not authorized 181 access pursuant to sections 1 to 8, inclusive, of this act.

Sec. 7. (NEW) (*Effective from passage*) There is established a Nonstate Public Health Care Advisory Committee. The committee shall make advisory recommendations concerning health care coverage of nonstate public employees to the Health Care Costs Containment Committee. The advisory committee shall consist of nonstate public employers and employees participating in the state plan and shall include the following members appointed by a method to be determined by the Comptroller: (1) Three municipal employer representatives, one of whom represents towns with populations of one hundred thousand or more, one of whom represents towns with populations of at least twenty thousand but under one hundred thousand, and one of whom represents towns with populations under twenty thousand; (2) three municipal employee representatives, one of whom represents employees in towns with populations of one hundred thousand or more, one of whom represents employees in towns with populations of at least twenty thousand but under one hundred thousand, and one of whom represents employees in towns with populations under twenty thousand; (3) three board of education employers, one of whom represents towns with populations of one hundred thousand or more, one of whom represents towns with populations of at least twenty thousand but under one hundred thousand, and one of whom represents towns with populations under thousand; (4)three board of education employee twenty representatives, one of whom represents towns with populations of one hundred thousand or more, one of whom represents towns with populations of at least twenty thousand but under one hundred thousand, and one of whom represents towns with populations under twenty thousand; and (5) one neutral chairperson, who shall be a

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210 member of the National Academy of Arbitrators or an arbitrator

- 211 authorized by the American Arbitration Association or the Federal
- 212 Mediation and Conciliation Service to serve as a neutral arbitrator in
- 213 labor relations cases.
- Sec. 8. (NEW) (Effective January 1, 2009) Notwithstanding any 214 215 provision of the general statutes, two or more municipalities may form 216 a single group, by written agreement, for the purpose of procuring 217 health insurance for their employees. Such written agreement shall 218 establish the membership of such group, the duration of such health 219 insurance coverage, requirements regarding the payment of premiums 220 for such health insurance coverage, and the procedure for a 221 municipality to withdraw from such group and terminate such health 222 insurance coverage. A group established pursuant to this section shall 223 procure such health insurance coverage on a fully underwritten basis. 224 Such health insurance coverage shall meet the requirements set forth in 225 chapter 700c of the general statutes. Any group established pursuant to 226 this section shall not be deemed a fictitious group if the group is 227 procuring health insurance coverage in accordance with this section.
- Sec. 9. Subparagraph (B) of subdivision (4) of section 38a-564 of the 2008 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2009*):
  - (B) "Small employer" does not include (i) a municipality procuring health insurance pursuant to section 5-259 of the 2008 supplement to the general statutes or section 2 of this act, (ii) a private school in this state procuring health insurance through a health insurance plan or an insurance arrangement sponsored by an association of such private schools, (iii) a nonprofit organization procuring health insurance pursuant to section 5-259 of the 2008 supplement to the general statutes, unless the Secretary of the Office of Policy and Management and the State Comptroller make a request in writing to the Insurance Commissioner that such nonprofit organization be deemed a small employer for the purposes of this chapter, (iv) an association for personal care assistants procuring health insurance pursuant to section

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5-259 <u>of the 2008 supplement to the general statutes,</u> or (v) a community action agency procuring health insurance pursuant to

section 5-259 of the 2008 supplement to the general statutes."

This act shall take effect as follows and shall amend the following sections:		
Section 1	from passage	New section
Sec. 2	September 1, 2008	New section
Sec. 3	September 1, 2008	New section
Sec. 4	September 1, 2008	New section
Sec. 5	from passage	New section
Sec. 6	January 1, 2009	New section
Sec. 7	from passage	New section
Sec. 8	January 1, 2009	New section
Sec. 9	January 1, 2009	38a-564(4)(B)